2.813,8

Direct:

(214) 981-3481

Facsimile: (214) 981-3400

RESPONSE TRANSMITTAL AND FEE AUTHORIZATION

1:01 . (-c	. 7 2003 (5)	Arron	NEW DOOR ON N	0 . 151(2/02	700	Cupin	No. 00/906 9	72			
	ATTORNEY DOCKET No.: 15162/03780					SERIAL NO.: 09/896,873					
FILING			RMATION NO:	CUSTOMER 1		EXAM			GROUP A		
June 29.		1027		24367		Erik J.	Kielin		281	3	
INVENT	OR(S): Masaka	azu OKAE	OA, et al.								
			YSTAL ELEMEN DISPLAY ELEM				YDOMAIN AND M THE SAME)	IONODO	OMAIN STATI	ES (AS	
MAIL	STOP					I here	eby certify that thi	is corres	spondence is l	being	
COMMISSIONER FOR PATENTS							deposited with the United States Postal Service as first				
P.O. BOX 1450 - ALEXANDRIA, VA 22313-1450							class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on				
The anicondition in the new partition of the anicond harmonisms							November 19, 2003				
TRANSMITTED HEREWITH FOR THE ABOVE IDENTIFIED						Date of Deposit					
PATENT APPLICATION IS: (A) A response to the Office Action dated:							Mark A. Dodd Name of Applicant, Assignee, or Registered				
(A) A response to the Office Action dated:							Representative				
☐ (B) A Petition for Extension of Time ☐ for 1 month ☐ for 2 months ☐ for 3 months;											
A Petition for Extension of Time, having been previously filed,						Marker Dras					
for 1 month for 2 months for 3 months						Signature November 19, 2003					
(C) A Notice of Appeal. \$						Date of Signature					
(D) An Appellant's Brief on Appeal. \$										- Annie 4	
(E)	Other: Petitic	n to Chan	ge Inventorship	. \$130.00					OEC	7.5 FTI	
	Small entity s	tatus unde	r 37 CFR § 1.2	7 has been pre	viously estab	lished			୍ । ୯ ଫ		
Small entity status under 37 CFR § 1.27 has been previously established The claims fee, if any, has been calculated as shown below										i in	
							SMALL ENTITY LARGE ENTITY				
	CLAIMS				7	31417.11	E ENTIT		52 (KO)	. DIVIII	
	REMAINING		Highes (No. Previously	PRESENT	l R	ATE	ADD'L FEE		R o JE	Add't Fee	
	AFTER AMENDMENT		PAID FOR	Extra							
TOTAL		Minus	·		1 _x	\$9	\$	OR	x \$18	\$	
INDEP.		Minus			-1 -	\$43		٠.,	x \$86		
						\$145			+ \$290		
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\boxtimes							count No. 18-12	60, wh	ich includes		
	the amoun			s fee calculated			7 (p) (p)				
\square			00 for the fee fo					hic ann	lication		
\boxtimes	Please charge any additional fees (other than issue fee) required during the pendency of this application to Deposit Account No. 18-1260. Please credit any overpayment to Deposit Account No. 18-1260.										
\boxtimes											
_		15					-				
Novami	ber 19, 2003										
		OWNER	VOOD		Ry M.	(L)	6 Dorles				
							ark A. Dodd				
						ent for Applicants					
Main: (214) 981-3300						Registration No. 45,729					

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130.00 DA

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